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PTO/SB/01 (12-07)

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**DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)**

Declaration Submitted with Initial Filing      OR       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	1/1479
First Named Inventor	Heinz-Gerd Klaes
<b>COMPLETE IF KNOWN</b>	
Application Number	10 / 809,609
Filing Date	March 25, 2004
Group Art Unit	To be assigned
Examiner Name	To be assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PHARMACEUTICAL COMPOSITION OF ANTIVIRAL AGENTS**

the specification of which  
 is attached hereto  
 OR  
 was filed on (MM/DD/YYYY) 03/25/2004 as United States Application Number or PCT International Application Number 10/809,609 and was amended on (MM/DD/YYYY)    (If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			YES	NO
03029524.0	EP	12/20/2003	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
03016207.7	EP	07/17/2003	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
03007071.8	EP	03/27/2003	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

**Burden Hour Statement:** This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named Inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  →  Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Robert P. Raymond	25,089	Anthony P. Bottino	41,629
Michael P. Morris	34,513	Susan K. Pochiari	45,016
Mary-Ellen M. Devlin	27,928	Philip I. Datlow	41,482
Alan R. Stampel	28,991	David A. Dow	48,124
Timothy X. Witkowsky	40,232	Andrea D. Small	54,859

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:  Customer Number or Bar Code Label  28501 OR  Correspondence address below

Name			
Address			
Address	State	ZIP	
City		Fax	
Country			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:			
Given Name (first and middle if any)		Family Name or Surname	
Heinz-Gerd	KLAES		
Inventor's Signature	July 26, 2004		
Residence: City	Gau-Bickelheim	State	Country
Post Office Address	Germany		
Post Office Address	City	State	ZIP
Country			
Germany			

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



PTO/SB/02A (08-03)

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## ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

## DECLARATION

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Elena		KOUNDOURAKIS		
Inventor's Signature				Date
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City Ridgefield				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
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Inventor's Signature				Date
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Mailing Address		State	CT	Zip 06877 Country USA
City Ridgefield				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname		
Douglas Lytle		MAYERS		
Inventor's Signature				Date
Residence: City Newtown	State	CT	Country USA	Citizenship US
Mailing Address 900 Ridgebury Road				
Mailing Address		State	CT	Zip 06877 Country USA
City Ridgefield				

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Docket No. 1/1479





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Direct all correspondence to:  Customer Number  28501 OR  Correspondence address below or Bar Code Label

Name			
Address			
Address	State	ZIP	
City	Telephone	Fax	
Country			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:

Given Name (first and middle if any)

Family Name or Surname

Heinz-Gerd

KLAES

Inventor's Signature				Date	
Residence: City	Gau-Bickelheim	State	Country	Germany	Citizenship
Post Office Address	Ludwig-Jahn-Strasse 16				
Post Office Address	Gau-Bickelheim	State	ZIP	55599	Country
City					Germany

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DECLARATION		ADDITIONAL INVENTOR(S)	
		Supplemental Sheet	
		Page 1 of 1	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Elena Inventor's Signature <i>Elena Koundourakis</i>		KOUNDOURAKIS	
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Mailing Address Ridgefield City		State Ct	Zip 06877 Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Douglas Lytle Inventor's Signature <i>Douglas F. Lytle</i>		MAYERS	
Residence: City Newtown	State CT	Country USA	Citizenship US
Mailing Address 900 Ridgebury Road			
Mailing Address Ridgefield City		State CT	Zip 06877 Country USA

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